

| POSITION | INITIALS | ID NO. | DATE |
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| FEE DETERMINATION | 517 | | |
| O.I.P.E. CLASSIFIER | | 19 | |
| FORMALITY REVIEW | AS | 7170 | 11/13 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
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| Final | 11/16/02 |
| Original | 11/16/02 |
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| Claim | Date |
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| Original | 11/16/02 |
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| Claim | Date |
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| Final | |
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If more than 150 claims or 10 actions
staple additional sheet here

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